## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10825277

	CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OTHER THAN		
ľF	TOTAL CLAIMS			32		•		RATE	FEE	OF		ENTITY	
╟╒	FOR		NUMBER FILED		NUMBER EXTRA		1	BASIC FI		ار	RATE BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			23.	33 : minus 20=					118	OR		770.00	
╟	IDEPENDENT	· · · · · · · · · · · · · · · · · · ·	0 .			<u>.3</u>	1	X\$ 9=	1/17	OR	X\$18=	<u> </u>	
<b>I</b>		ENDENT CLAIM I	111111111111111111111111111111111111111		ς	<i>b</i>	ł	X43=		OR	X86=		
ᆫ							]	+145=		OR	+290=	•	
* If the difference in column 1 is less than zero, enter "0" in column 2							_	TOTAL	502	OR	TOTAL		
	(	(Column 1)	AMENDE	MENDED - PART II (Column 2) (Column 3)			<u>.</u>	SMALL	ENTITY	OR	OTHER SMALL	The state of the s	
AMENDMENTA	10/29/04	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· 33	Minus	- 3				X\$ 9=		OR	X\$18=		
AM	Independent FIRST PRES	pendent   Dependent   Presentation of Multiple Dependent		PENDENT	CLAIM	-		X43=		OR	X86=		
<b>L</b>	,					'	+145=		OR	+290=	·		
				•		•	L Al	·TOTAL		OR ,	TOTAL		
		(Column 1)		(Colum		(Column 3)				•			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBE PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		· .		X\$ 9=		OR .	X\$18=		
	Independent	•	Minus	***				X43=		OR	X86=		
	FIRST PRESE	NTATION OF ML	ILTIPLE DEI	PENDENT C	LAIM		H						
							L	+145=		OR	+290=		
							AD	TOTAL DIT. FEE		OR A	TOTAL DDIT. FEE		
•		(Column 1) CLAIMS		(Column		Column 3)	· <u>·</u>	•					
MEN		REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOUS PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**	=		,	K\$ 9=		OR	X\$18=		
	Independent		Minus	***				X43=			X86=		
1	FIRST PRESE	H			OR								
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ** ADDITISES OR +290=													
H	the 'Highest Nur	nber Previously Paid ber Previously Paid	d For IN THIS	SPACE is le	ss than 3	l. enter "3."		OIT. FEE <b>L</b> in the appr		AL	DOTT. FEE L. nn 1.		